

TESTIMONY OF
ALLISON S. KOSTRZEWA, RN, MSNc
REGARDING
S.B. 138
AN ACT ESTABLISHING A TASK FORCE TO STUDY "AGING IN PLACE"

JOINT COMMITTEE ON AGING

Senator Prague, Senator Serra, and members of the Aging Committee, my name is Allison Kostrzewa and I am currently finishing my Master's in Nursing with a concentration in Public Health at the University of Hartford. I am pleased to support SB 138 An Act to Establish a Task Force to Study "Aging in Place". This legislation will begin the process of developing community specific and fiscally sound ways to support municipalities in proactively preparing for and assisting our elderly population to remain in their homes for as long as possible.

Currently, Connecticut spends greater than \$2 billion per year on long-term care and Medicaid supports for the elderly population representing 13% of the annual budget. Of these monies, a disproportionately large portion of 65% is spent on highly expensive long-term care, which services a small proportion of recipients. The remaining 35% of the budget is spent on home and community based services, which actually services over 50% of all elderly Medicare recipients. According to the Connecticut Commission on Aging, it is projected that the cost avoidance will exceed \$900 million by 2025 if this structure is rebalanced.¹

The aging of our population is not unique to Connecticut. However, according to the 2010 US census, there are 506,559 Connecticut citizens aged 65 or greater representing 14.2% of our population, which is larger than the national average of 13%. Currently, 26.9% of our population, nearly a million people, are baby boomers born between the years 1946-1964 and will be reaching the age of 65 within 18 years. This represents a 29% population growth from the previous census.²

According to a survey conducted in 2000 by the American Association for Retired Persons (AARP), 92% of Americans aged 65 or greater wish to spend the remainder of their lives in their current home. However, simply remaining in one's home is not sufficient to ameliorate the health inequities and social isolation often experienced by our seniors. Aging does not exist in a vacuum separate from other the social that influence health. How populations perceive, define, and explain aging is dependent upon a series of complex and interrelated factors including social policies, demographics, economics, and cultural values.³ This is what we in public health call

the Ecological Perspective. It is through this lens that we recognize that development of a cooperative and community oriented policy focus will enable enhanced wellbeing and quality of life for our seniors.

Currently, municipalities and state government are able to offer basic health and nutrition programs to a portion of the elderly population, but do not have the policies, programs, or services in place **to promote quality of life and foster independent living strategies**. The needs of the elderly population are interdependent and require a comprehensive, coordinated and holistic approach to service delivery. In my practice, I frequently encounter elderly patients and their families who are searching for ways to keep these elders safely at home. The establishment of a task force to study aging in place will allow for assessment of these needs and covers a mission much broader than that of the Long-Term Planning Committee created in 1998.

According to the World Health Organization (nd), "making cities and communities age-friendly is one of the most effective policy approaches for responding to demographic aging." ⁴ The creation of a task force to study "aging in place" in Connecticut is in line with the U.S. Administration on Aging's 2008 challenge to create supportive communities for elderly populations through modernization of systems of care. ⁵ Further, creation of this task force is in congruence with the goals set forth in Healthy People 2020⁶ and the National Prevention Strategy⁷.

I strongly support the development of this task force and applaud the State of Connecticut for it's innovative spirit. In passing SB 138. Connecticut would join with other States such as New York⁸, Arizona⁹, and Minnesota¹⁰ in becoming pioneers in assuring a safe and healthy environment where are seniors can truly "age in place".